PTO/SB/06 (12-04) Approved for use through 7/31/2006, CM8 0651-0032 U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a contaction of information unless II displays a valid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD O O Doctor Humber Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE (1) FEE (1) RATE (\$ FEE (\$) BASIC FEE . N/A (37 CFR 1.16(a), (b), or (c)) N/A 150.00 NVA 300.00 SEARCH FEE N/A N/A (37 CFR 1 16(10. (1), or (m)) \$250 N/A \$500 **EXAMINATION FEE** NA (3) CFR 1.16(d. (p), or (q)) N/A \$100 NA \$200 TOTAL CLAIMS X\$ 25 .. (37 CFR 1.16(I)) minus 20 = X\$50 OR. INDEPENDENT CLAIMS X100 (37 CFR 1.16(h)) minus 3 . « X200 If the specification and drawings exceed 100 APPLICATION SIZE . sheets of paper, the application size fee due FEF is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(D) +180= +360= "If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) OR SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT. NUMBER RATE (1) ADDI-RATE (\$) ADOL AFTER PREVIOUSLY **EXTRA** 10/06 TIONAL AMENDMENT TIONAL PAID FOR FEE (1) Total FEE (\$ Minus 92 ENDM X\$ 25 X\$50 OR . Independent D7 CFR 1,100 b Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE

(Column 1)						(Column 2)	(Column 3)		
MENDMENT 8	:	REM	AIMS AINING TER IDMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		
	Total profit titelli	1:3	'7	Minus		12	0		
	. Independent O7 CFR 1.16(n)	. 7	·	Minus	•==	3	- O .		
S	Application Size Fee (37 CFR 1.16(s))								
~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16m)								

RATE (\$)	ADDI- TIQNAL FEE (3)		RATE (\$)	ADDI- TIONAL FEE (3)	
X\$ 25 .		OR	X\$50 ·	•	1
X100 "		OR	X200		
+180=		OR	+360=		
TOTAL ADD'L FEE	\overline{V}	OR	TOTAL ADD'L FEE		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in, column 1.

This collection of Information is required by 97 CFR 1.16. The Information is required to obtain or retain a bareful by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or successions for reducing this burden, should be cant to the Chief Information Officer, U.S. Patient on the amount of the you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.